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23599 7590 05/18/2009 MILLEN, WHITE, ZELANO & BRANIGAN, P.C. 2200 CLARENDON BLVD. SUITE 1400				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
ARLINGTON, V	A 22201						(Depositor's nume)	
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							(Date)	
APPLICATION NO.	ICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/543,109 TITLE OF INVENTION:	07/22/2005 CARBOXAMIDE DER	RIVATIVES AND THEIF	Dieter Dorsch R USE AS FACTOR XA	INHIBITORS	MB	ERCK-3039	5468	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE .	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	1	\$1810	08/18/2009	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS					
SHTERENGARTS	, SAMANTHA L	1626	514-228800	J				
Address form PTO/SB "Fee Address" indi- PTO/SB/47; Rev 03-03 Number is required.	ondence address (or Cha /122) attached. cation (or "Fee Address' 2 or more recent) attach	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. MILLEN, WHITE, ZELAN BRANTGAN, P.C. 2 3 THE PATENT (print or type)						
	ess an assignee is identi i in 37 CFR 3.11. Comp INEE		data will appear on the T a substitute for filing as (B) RESIDENCE: (CIT	patent. If an assigne n assignment.			cument has been filed for	
Please check the appropri	•	categories (will not be pr	inted on the patent):	Individual 🖾 Co	rporation	or other private gro	up entity Government	
Advance Order - #	o small entity discount p	permitted)	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-3402 (enclose an extra copy of this form).					
NOTE: The Issue Fee and	s SMALL ENTITY state	is. See 37 CFR 1.27.	b. Applicant is no lo d from anyone other than Office.				R 1.27(g)(2). e assignee or other party in	
	/Csaba Hent			Date <u>Áu</u>	gust	18, 2009		
Typed or printed name	. Csaba Hent	ALL HALLOW A CONTROL OF THE ACT O	Registration N	U	0,908			
Alexandria, Virginia 223	13-1430.	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR persons are required to re					by the USPTO to process) g gathering, preparing, and ne you require to complete extment of Commerce, P.O. for Patents, P.O. Box 1450, number.	